IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:

Dershem et al.

Title:

BENZOXAZINES,

THERMOSETTING RESINS COMPRISED THEREOF, AND METHODS FOR USE THEREOF

Appl. No.:

Unknown

Filing

Filed Herewith

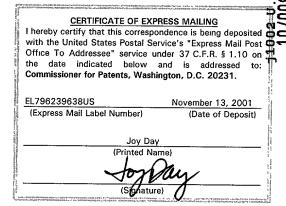
Date:

Examiner:

Unknown

Art Unit:

Unknown



UTILITY PATENT APPLICATION TRANSMITTAL

Commissioner for Patents Box PATENT APPLICATION Washington, D.C. 20231

Sir:

Transmitted herewith for filing under 37 C.F.R. § 1.53(b) is the nonprovisional utility patent application of: Stephen M. Dershem, Puwei Liu and Farhad Mizori

[] Applicants claims small entity status under 37 CFR 1.27.

Enclosed are:

[X]	Cover Sheet, Specification, Claim(s), and Abstract (36 pages).
[]	Informal drawings.
[]	Declaration and Power of Attorney.
[]	Assignment of the invention to
[]	Assignment Recordation Cover Sheet.

[Y]	Ratura Pagaint Pagagard								
[]	Application Data Sheet (37 CFR 1.76).								
[]	Form PTO-1449 with copies of listed reference(s).								
[]	Information Disclosure Statement.								
[]	Request for application not to be published with certification under 35 US(122(b)(2)(B)(i).								
i j	Small Entity statement.								

The filing fee is calculated below:

	Claims	I	ncluded in		Extra				Fee
	as Filed		Basic Fee		Claims		Rate		Totals
Basic Fee							\$740.00		\$740.00
Total Claims:	35		20	=	15	х	\$18.00	=	\$270.00
Independents:	1	-	3	=	0	х	\$84.00	=	\$0.00
If any Multiple [Dependent C	Claim(s	s) present:			+	\$280.00	=	\$0.00
Surcharge under 37 CFR 1.16(e) for late filing of Executed + \$130.00 =								=	\$130.00
							SUBTOTAL:	=	\$1140.00
[]	Small Entity Fees Apply (subtract ½ of above): = TOTAL FILING FEE: =								\$0.00
									\$1,140.00

- A check in the amount of \$_____ to cover the filing fee is enclosed.
- [X] The required filing fees are not enclosed but will be submitted in response to the Notice to File Missing Parts of Application.
- The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 50-0872. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 50-0872.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date: November 13, 2001

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